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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/735,340
	Filing Date	December 12, 2003
	First Named Inventor	Adam GOLD
	Art Unit	3734
	Examiner Name	M. Mendoza
	Attorney Docket No.	506512002100

Please change the Correspondence Address for the above-identified application to:

☒ The address associated with Customer Number:

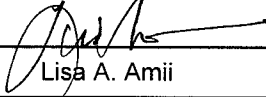
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<input type="checkbox"/> Firm or Individual Name					
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I am the:

- ☐ Applicant/Inventor
☐ Assignee of record of the entire interest.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
☒ Attorney or agent of record. Registration Number 48,199.
☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____.

Signature	
Typed or Printed Name	Lisa A. Amii
Date	February 19, 2009
Telephone	(650) 813-5674

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.